

# PAPERWORK REDUCTION ACT SUBMISSION

**Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the supporting statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, DC 20503.**

1. Agency/Subagency originating request	2. OMB control number <span style="float: right;">b. <input type="checkbox"/> None</span> a. _____ - _____
3. Type of information collection ( <i>check one</i> ) a. <input type="checkbox"/> New Collection b. <input type="checkbox"/> Revision of a currently approved collection c. <input type="checkbox"/> Extension of a currently approved collection d. <input type="checkbox"/> Reinstatement, without change, of a previously approved collection for which approval has expired e. <input type="checkbox"/> Reinstatement, with change, of a previously approved collection for which approval has expired f. <input type="checkbox"/> Existing collection in use without an OMB control number For b-f, note Item A2 of Supporting Statement instructions	4. Type of review requested ( <i>check one</i> ) a. <input type="checkbox"/> Regular submission b. <input type="checkbox"/> Emergency - Approval requested by _____ / _____ / _____ c. <input type="checkbox"/> Delegated
	5. Small entities Will this information collection have a significant economic impact on a substantial number of small entities? <input type="checkbox"/> Yes <input type="checkbox"/> No
	6. Requested expiration date a. <input type="checkbox"/> Three years from approval date b. <input type="checkbox"/> Other Specify: _____ / _____
7. Title	
8. Agency form number(s) ( <i>if applicable</i> )	
9. Keywords	
10. Abstract	
11. Affected public ( <i>Mark primary with "P" and all others that apply with "x"</i> ) a. <input type="checkbox"/> Individuals or households d. <input type="checkbox"/> Farms b. <input type="checkbox"/> Business or other for-profit e. <input type="checkbox"/> Federal Government c. <input type="checkbox"/> Not-for-profit institutions f. <input type="checkbox"/> State, Local or Tribal Government	12. Obligation to respond ( <i>check one</i> ) a. <input type="checkbox"/> Voluntary b. <input type="checkbox"/> Required to obtain or retain benefits c. <input type="checkbox"/> Mandatory
13. Annual recordkeeping and reporting burden a. Number of respondents _____ b. Total annual responses _____ 1. Percentage of these responses collected electronically _____ % c. Total annual hours requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____	14. Annual reporting and recordkeeping cost burden ( <i>in thousands of dollars</i> ) a. Total annualized capital/startup costs _____ b. Total annual costs (O&M) _____ c. Total annualized cost requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____
15. Purpose of information collection ( <i>Mark primary with "P" and all others that apply with "X"</i> ) a. <input type="checkbox"/> Application for benefits e. <input type="checkbox"/> Program planning or management b. <input type="checkbox"/> Program evaluation f. <input type="checkbox"/> Research c. <input type="checkbox"/> General purpose statistics g. <input type="checkbox"/> Regulatory or compliance d. <input type="checkbox"/> Audit	16. Frequency of recordkeeping or reporting ( <i>check all that apply</i> ) a. <input type="checkbox"/> Recordkeeping b. <input type="checkbox"/> Third party disclosure c. <input type="checkbox"/> Reporting 1. <input type="checkbox"/> On occasion 2. <input type="checkbox"/> Weekly 3. <input type="checkbox"/> Monthly 4. <input type="checkbox"/> Quarterly 5. <input type="checkbox"/> Semi-annually 6. <input type="checkbox"/> Annually 7. <input type="checkbox"/> Biennially 8. <input type="checkbox"/> Other (describe) _____
17. Statistical methods Does this information collection employ statistical methods <input type="checkbox"/> Yes <input type="checkbox"/> No	18. Agency Contact (person who can best answer questions regarding the content of this submission)  Name: _____ Phone: _____

## 19. Certification for Paperwork Reduction Act Submissions

On behalf of this Federal Agency, I certify that the collection of information encompassed by this request complies with 5 CFR 1320.9

**NOTE:** The text of 5 CFR 1320.9, and the related provisions of 5 CFR 1320.8(b)(3), appear at the end of the instructions. *The certification is to be made with reference to those regulatory provisions as set forth in the instructions.*

The following is a summary of the topics, regarding the proposed collection of information, that the certification covers:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It reduces burden on small entities;
- (d) It used plain, coherent, and unambiguous terminology that is understandable to respondents;
- (e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (f) It indicates the retention period for recordkeeping requirements;
- (g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):
  - (i) Why the information is being collected;
  - (ii) Use of information;
  - (iii) Burden estimate;
  - (iv) Nature of response (voluntary, required for a benefit, mandatory);
  - (v) Nature and extent of confidentiality; and
  - (vi) Need to display currently valid OMB control number;
- (h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected (see note in Item 19 of instructions);
- (i) It uses effective and efficient statistical survey methodology; and
- (j) It makes appropriate use of information technology.

If you are unable to certify compliance with any of the provisions, identify the item below and explain the reason in Item 18 of the Supporting Statement.

Signature of Senior Official or designee

Date

Agency Certification (signature of Assistant Administrator or head of MB staff for L.O.s, or of the Director of a Program or Staff Office)	
Signature	Date
Signature of NOAA Clearance Officer	
Signature	Date

## **Supporting Statement for OMB Clearance of the Atka Mackerel VMS Program**

### **1. Program background and need for information collection.**

On January 22, 1999, NMFS published a final rule that will reduce the percentage of Atka mackerel taken from Steller sea lion critical habitat over a 4-year period in the Western and Central Districts of the Aleutian Islands Subarea (64 FR 3446). This action was taken to avoid significant fishery-induced localized depletions of Atka mackerel, a primary prey species for Steller sea lions in the Aleutian Islands; and avoid potential jeopardy to the continued existence of Steller sea lion populations and their critical habitat through excessive removal of prey. Critical habitat for Steller sea lion has been defined to include (among other areas), the marine areas within 20 nm of major rookeries and haulouts of the species west of 144°W longitude. The North Pacific Fisheries Management Council has determined that the additional information provided by a VMS (Vessel management system) program would assist in the management of the Atka Mackerel fishery and has requested that NMFS develop regulations to implement such a system.

In order to participate in a fishery requiring VMS, a vessel would be required to install a VMS transmitter on their boat. The transmitter automatically determines the vessel's location several times per hour using Global Positioning System (GPS) satellites. The position is then transmitted to NMFS via a mobile communication service provider. A NMFS-approved VMS transmitter costs approximately \$3,000 per unit and the charge to the vessel owner for the transmission of VMS position data is \$5.00 per day. The VMS transmitters are designed to be tamper resistant and automatic. In most cases, the vessel owner would be unaware of exactly when the unit was transmitting and would be unable to alter the signal or the time of transmission.

The Atka mackerel trawl fishery is a large-volume low-value fishery pursued by a small group (6 to 10 vessels) of large factory trawlers. Most Atka Mackerel is harvested in or near critical habitat. When critical habitat areas are closed, NMFS expects that continued Atka mackerel fishing will take place very close or adjacent to closed areas. Effective enforcement of these reductions will depend on the use of a vessel monitoring system (VMS) to accurately monitor vessels fishing near critical habitat when these areas are closed. NMFS intent to implement a VMS system prior to the September 1, 1999 Atka mackerel season was noted in the final rule that established the protective measures.

### **2. How and by whom will the information be used**

The information will be used primarily by the Office of Law Enforcement, Alaska Region, NMFS and secondarily by the Sustainable Fisheries Division, Alaska Region, NMFS. The information will be used to track the movement of vessels participating in the Atka Mackerel fisheries during those weeks when Atka mackerel is open to directed fishing outside of critical habitat and closed to directed fishing inside of critical habitat. If a vessel does fish inside closed critical habitat, the information will be used as evidence in any prosecution. The information will also be used to assess the effectiveness of VMS for possible expansion to larger portions of the Alaska groundfish fleet.

3. Describe any consideration of the use of improved information technology to reduce burden.

The information collection will be completely automated. The vessel owner will be required to install the unit. The unit will then automatically transmit vessel position. The vessel owner would be informed if for some reason the unit ceased transmitting and would be required to repair or replace it.

4. Describe efforts to identify duplication.

The information being collected is unique. There are no other VMS or similar programs currently underway off Alaska and no similar information is being collected by State or Federal agencies.

All of the vessels that will be required to carry a VMS unit are currently required to provide for the electronic transmission of observer data. The electronic data transmission program provides for the transmission of total catch and catch composition data by the observer. It does not allow for real-time data transmission and does not provide for automatic transmission of vessel position. The electronic data transmission program is covered under OMB Control No. 0648-0307.

5. Describe the burden on small entities.

All of the vessels participating in the Atka mackerel fishery are factory trawlers with gross annual receipts well in excess of \$3 million. None are small entities.

6. Describe the consequences to Federal program or policy activities if the collection is not conducted or conducted less frequently.

Without a VMS program, it will not be possible to effectively administer closures of critical habitat. NMFS would be forced to rely on traditional enforcement methods such as Coast Guard aerial surveillance. Because the critical habitat zones are spread over a large area and because most fishing outside of critical habitat will take place very near the boundaries, it would be impossible or prohibitively expensive to enforce the closures. The protection of critical habitat is a critical part of the recovery program for Steller sea lions and a statutory obligation under the Endangered Species Act.

7. Explain any special circumstances that require the collection to be conducted in a manner inconsistent with OMB guidelines.

This information collection will require that vessel position information be collected every 20 minutes while engaged in Atka mackerel fishing when critical habitat is closed. This frequency of reporting is necessary for effective enforcement of closed areas. Since the transmissions are automatic, this will not place a significant burden on the respondents.

8. Public comment or consultation on the information collection.

The proposed rule to implement the VMS program will be published in the Federal Register. The proposed rule specifically addresses the burden estimates of the expanded collection-of-information requirements and solicits public comment. The proposed and final rules that revised the Atka mackerel harvest guidelines also gave notice that NMFS intended to require VMS for vessels participating in the fishery.

9. Payment or gift to respondents.

No payment or gift to respondents is provided under this program.

10. Describe any assurance of confidentiality provided to respondents and the basis for the assurance in statute, regulation, or agency policy.

Information collected by a VMS program would be considered confidential by vessel owners. Both NMFS and the Coast Guard have worked to ensure the confidentiality of all transmissions and all VMS units include systems to minimized the risk of direct or inadvertent disclosure of vessel position. These transmissions would be considered confidential under NOAA Administrative Order 216-100, Confidentiality of Fishery Statistics, and are subject to the confidentiality protection of Section 402 of the Magnuson-Stevens Fishery Conservation and Management Act.

11. Collection of information of a private and sensitive nature.

The information collected under the VMS program does not include information of a sensitive nature.

12. Provide an estimate in hours of the burden of the collection of information.

Burden hours are summarized in Table 1. Each vessel would be required to install a NMFS supplied VMS unit. This is a fairly simple procedure that, in most cases, should take less than two hours. Our estimate of 6 hours/vessel is based on a worst case scenario where a 12 volt DC hookup is not convenient to a location where the VMS unit can be installed. The data transmission is automatic once the unit has been installed and activated, but the vessel must pay \$5.00/day for communication and messaging costs.

Table 1. Information collection budget for proposed VMS program.

Total number of vessels affected	12
Time for unit installation	6 hours
Time for unit maintenance	4 hours/year
Time for each transmission	5 seconds/transmission
Transmissions per vessel	72/day
Fishing days/year	21/yr
Total responses	18,144/yr
Data transmission cost/day	\$5.00/day
Total Annual hours	145.2/yr
Total Startup cost	\$36,000
Annualized startup cost (3 years)	\$12,000/yr
Total O and M cost	\$1,260/yr
Total Annualized cost burden	\$13,260/yr

13. Provide an estimate of the total annual cost burden to respondents or record keepers.

Costs for unit purchase, maintenance and installation and data transmission are summarized under item 12.

14. Provide an estimate of the total annual cost to the Federal Government.

NMFS will be required to ensure that units have been installed and are operational, and to review the data transmissions as required. NMFS estimates that this will require 120 hours per year.

15. Explain the reasons for any program changes or adjustments reported above.

This is a new program.

16. Publication of collected information.

No plans exist for publishing the results of the information collection that are discussed above.

17. Display of the expiration date for OMB approval of the information collection.

No forms will be developed by NMFS as part of this program. The transmission of the data is automatic and electronic and it would not be possible to display the OMB expiration date.

18. Exceptions to the certification statement

As explained above, there is no place where it would be possible to display or provide a certification statement.